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PTO/BB01 (09-04)

Approved for use through 07/31/2006. OMB 0551-0032

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|   |  |                        |                  |
|---|--|------------------------|------------------|
| <b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b><br>(37 CFR 1.63)  |  | Attorney Docket Number |                  |
|   |  | First Named Inventor   | JOAN B HARRISON, |
|   |  | COMPLETE IF KNOWN      |                  |
| <input checked="" type="checkbox"/> Declaration Submitted With Initial Filing<br>OR<br><input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) |  | Application Number     | P-T/NZ 0300234   |
|   |  | Filing Date            | 21 OCTOBER 2003  |
|   |  | Art Unit               |                  |
|   |  | Examiner Name          |                  |

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR FUEL INJECTION SYSTEMS

(Title of the Invention)

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the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

10/21/2003

as United States Application Number or PCT International

Application Number P-T/NZ 0300234 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country     | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed     | Certified Copy Attached?            |
|-------------------------------------|-------------|----------------------------------|--------------------------|-------------------------------------|
| 522153                              | NEW ZEALAND | 10/21/2002                       | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
|                                     |             |                                  | <input type="checkbox"/> | <input type="checkbox"/>            |
|                                     |             |                                  | <input type="checkbox"/> | <input type="checkbox"/>            |
|                                     |             |                                  | <input type="checkbox"/> | <input type="checkbox"/>            |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

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### DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☐ The address associated with Customer Number:  OR ☒ Correspondence address below

Name JOHN B. HARRISON.

Address 216 WHITFORD ROAD, HOWICK,

City AUCKLAND. State  ZIP

Country NEW ZEALAND. Telephone 64-9-534-4425 Fax 64-9-576-1106

I hereby declare that all statements made herein of my own knowledge are true and that all statements made by others and believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☒ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any)) JOHN BLAKEMORE Family Name or Surname HARRISON.

Inventor's Signature John B Harrison. Date 14 April 05

Residence: City AUCKLAND. State NZ Country NEW ZEALAND Citizenship NEW ZEALAND

Mailing Address 216 WHITFORD ROAD, HOWICK,

City AUCKLAND State  Zip  Country NEW ZEALAND

NAME OF SECOND INVENTOR: N/A ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))  Family Name or Surname

Inventor's Signature  Date

Residence: City  State  Country  Citizenship

Mailing Address

City  State  Zip  Country

☐ Additional inventor or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

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Annex US.III, page 3

PTO/SB/02A (09-04)  
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| DECLARATION                                |       | ADDITIONAL INVENTOR(S)<br>Supplemental Sheet                                  |             |
|--|-------|---|-------------|
|  |       | Page _____ of _____   |             |
| Name of Additional Joint Inventor, if any: |       | <input type="checkbox"/> A petition has been filed for this unsigned inventor |             |
| Given Name (first and middle (if any))     |       | Family Name or Surname  |             |
| Inventor's Signature                       |       | Date  |             |
| Residence: City                            | State | Country   | Citizenship |
| Mailing Address                            |       |   |             |
| City                                       | State | Zip   | Country     |
| Name of Additional Joint Inventor, if any: |       | <input type="checkbox"/> A petition has been filed for this unsigned inventor |             |
| Given Name (first and middle (if any))     |       | Family Name or Surname  |             |
| Inventor's Signature                       |       | Date  |             |
| Residence: City                            | State | Country   | Citizenship |
| Mailing Address                            |       |   |             |
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| Name of Additional Joint Inventor, if any: |       | <input type="checkbox"/> A petition has been filed for this unsigned inventor |             |
| Given Name (first and middle (if any))     |       | Family Name or Surname  |             |
| Inventor's Signature                       |       | Date  |             |
| Residence: City                            | State | Country   | Citizenship |
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PTC/SB/02B (00-04)

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**DECLARATION – Supplemental Priority Data Sheet**

[illegible]

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